

New Quick Guide Supports Patients' Choices



I'm pleased that <u>Healthwatch England</u> has been able to help NHS England develop its latest <u>Quick Guide</u>, aiming to support patients' choices to avoid long hospital stays.

Our 2015 <u>Safely Home</u> report amplified more than 3,200 voices – gathered with and through the local Healthwatch network – to show what happens when hospital discharge goes wrong for people and where creative common sense is helping to get it right.

Safely Home showed that people want to be treated with dignity, compassion and respect; to be involved in decisions about their discharge; to move smoothly from hospital to onward support in the community; and to know where they could go for help after discharge.

Importantly, people also told us that they want the full range of their needs and circumstances to be considered as a whole, not just the condition for which they've been treated.

Our report made clear that there is no simple fix, but nonetheless we saw and heard about lots of great efforts to make the discharge process work better for people. Unfortunately this good practice has so far not been widespread enough to resolve the issues.

Neither has there been a shortage of guidance and good practice, identifying solutions – so why might things be different this time around, and why were we pleased to get involved in this project?

I think there are at least three reasons for some optimism:

The first is the approach NHS England has taken to developing this <u>Quick Guide</u> and the model policy that goes with it. It's been good to see a collaborative process bringing together not just clinicians and managers but local Healthwatch and the voluntary sector. This has enabled the guide and policy to focus on spreading existing good practice and ensure it starts from the point of view of patients and families.

The second reason is that this work sits within a broader programme to improve discharge, through which the Department of Health is working with NHS England, NHS Improvement, the Department for Communities and Local Government, the Local Government Association and the Association of Directors of Adult Social Services.

This is just the kind of system-wide commitment to tackling discharge we hoped for when we produced our report. I'm also glad that we're able to ensure people's voices are heard in the programme through Healthwatch England's role in the expert reference group.

The third reason is the sheer force of economic circumstance. The human cost of not tackling discharge problems is matched by a significant financial cost, which is a compelling reason for minds across health and care to focus on this issue with renewed attention.

The Quick Guide will be a helpful tool to enable patients to understand their options, facilitate the right conversations and provide the peace of mind that comes from knowing what support will be in place. We'll be supporting local Healthwatch to help make sure the way people use the guide and implement the policy locally really delivers the improvements people need and want.

We'll also continue to work with NHS England and other partners to understand the impact of this and other initiatives. We'll be looking out for the difference it's making to people's ability to choose positively and with good support that guides them through options that make sense to

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